INSTRUCTIONS: No permits will be issued until all fe Checks are made payable to: Bayfield County Zoning DO NOT START CONSTRUCTION UNTIL ALL PERMITS MICRON Authorized Agent 66 HO TYPE OF PERMIT REQUESTED→ 不见 5001 10 Contractor Address of Property: \$5,000.00 ¥ Shoreland Existing Structure: (if permit being applied for is relevant to it) Proposed Construction: ☐ Non-Shoreland of Completion Value at Time Residential Use donated time & PROJECT LOCATION SUBMIT: COMPLETED APPLICATION, TAX \* include FAILURE TO OBTAIN A PERMIT OR STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

[] (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. 1 (we) acknowledge that I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. 1 (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection. Commercial Use Proposed Use Municipal Use Section PO Box 58 Planning and Zoning Depart. **Bayfield County** Washburn, WI 54891 (715) 373-6138 旗 MICHAELIS \_1/4, スARY IRON LAKE 24 CONST.
Person Signing Appl ☐ Conversion☐ Relocate (exi (Fyes--continue of Lake, Pond or Flowage If yes--continue Addition/Alteration [What Legal Description: ☐ Is Property/Land within 300 feet of River, Stream (ind.Intermittent)

Creek or Landward side of Floodplain? If yes—continue — Run a Business on New Construction Property , Township NEUMANN Project < × applying for) X LAND USE 2 47 Principal Structure (first structure on pr Residence (i.e. cabin, hunting shack, etc. Residence (i.e. cabin, with Loft Mobile Home (manufactured date) Addition/Alteration (specify) Bunkhouse w/ ( sanitary, or Other: (explain) Accessory Building Special Use: (explain) Accessory Building Addition/Alteration (specify) Conditional Use: (explain) (Use Tax Statem Gov't Lot behalf of Owner(s)) Permit DWWG N, Range 210000 1-Story and/or basement No Basement 4 with a Deck with (2<sup>nd</sup>) Deck with (2<sup>nd</sup>) Porch with Attached Garage with a Porch # of Stories 2-Story Basement 1-Story + Loft 31-AB Foundation Lot(s) ٩ SANITARY となる (specify) 715-209-4363 16411 DYSPROSION ST. 115-209-4363 **H**eN PIN: (23 digits)
04-022-2-47-09-Agent Phone: Tity/State/Zip 8081 する CSM actor Pho Proposed Structure □ PRIVY Length: Length: I STORY - ATTACHED RIVER sleeping quarters, <u>or</u> 0 Year Round Seasonal on property) 10-32/33 Vol & Page SZHIDOL Use 1> wn of: 300 WISCONSIN PERMIT ☐ CONDITIONAL USE ☐ SPECIAL USE | City/State/Zip: Agent Mailing ٤ Plumber: Distance Structure is from Shoreline: Distance Structure is from Shoreline: 1 bedrooms 24-□ cooking & food prep facilities) None w Lot(s) No. 앜 # 54847 ng Address (include City/State/Zip):
PHANTOM LAKE RD
RNER, WI 54647 RAMSEY 70 05-001-02110 Width: Width: Block(s) No. Municipal/City (New) Sanitary None Compost Toilet Portable (w/service contract) <u>く</u>こ、 24 Permit #: 3415 Date: Amount Paid: Refund: Sewer/Sanitary System Is on the property? Volume 10 Lot Size What Type of Subdivision: Attached

Attached

Yes 2 N

Recorded Document: (i.e. Property 55302 feet Specify Type ☐ B.O.A **Dimensions** Is Property in Floodplain Zone?
☐ Yes 74 がが  $\times |\times |\times |\times |\times |\times |$ × × X<sub>N</sub>o × ×i × × × Height: Height: Ī 00 612-532-6357 763-753-3696 Cell Phone: Telephone: Plumber Phor Written Authorization 3.26 0.3.0 0.3.0 Page(s) 32 OTHER 00 00 Are Wetlands
Present?

Yes
No Footage 360 Square X Well Water 26 СİҰ

(If you are signing on behalf of the owner(s) a letter of authorization must accompany this

must acco

mpany this application)

Attach
Copy of Tax Statement
the property send your Recorded Deed Date 100

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5484

to send permit 63305

PHANTOM

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## Setbacks: (measured to the closest point)

Setback from the Centerline of Platted Road Setback from the Established Right-of-Way Setback from the Established Right-of-Way Setback from the North Lot Line Setback from the South Lot Line Setback from the South Lot Line Setback from the West Lot Line Setback from the East Lot Line Setback from the East Lot Line Setback from the East Lot Line Setback to Drain Field Setback to Privy (Portable, Composting) Setback to Privy (Portable, Composting) Setback to Brain Field Feet Setback to brain from which the setback the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the	Setback to Privy (Portable, Composting)	Setback to Drain Field	Setback to Septic Tank or Holding Tank	ELDACA HOLL THE FACE TO SELECT		Setback from the South Lot Line	Setback from the North Lot Line	S(DaCV II OH) CITC ESWARISHER 8		Sathack from the Centerline of Platted Road > 200	Control Manager Comment of the Control of the Contr	Description Meass
rdinary high-water mark) tream, Creek r Bluff Area  Area	reet	Feet			250 + Feet Setback from 20% Slope			Setback from the <b>Bank o</b>	Feet	Feet		Measurement Desc
te buenonski smi	with he measured must be visible from one previously surv						м.	r Bluff	stream, Creek	/ater mark) 2	4	Description

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

## (9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: All Municipalities Are Required To Enforce The Uniform Dwelling Code. The Local Town, Village, City, State or Federal agencies may also require permits.

Hold For Sanitary:	Signature of Aperto	War of the other of the faunt	Condition(s):Town. Committee or Board Conditions Attac THE TERMS & CADANAS OF THE A	Date of Inspection: 6-2-(\(\nu\)	The other fourt may the Usako Pallory Mitached	Inspection Record: Nod-Cod English Decrois	Was Parcel Legally Created <b>《Yes □ No</b> Was Proposed Building Site Delineated <b>《Yes □ No</b>	Granted by Variance (B.O.A.)  Greated by Variance (B.O.A.)  Case #:	Is Parcel a Sub-Standard Lot	Permit # 10 - 0440	Permit Denied (Date):	Issuance Information (County Use Only)
Hold For Affidavit: 🗌 Hold For Fees: 🗎		BUNCT	Condition(s):Town, Committee or Board Conditions Attached? I ves I No-(11 No they need to be attached) Higgs uffled Right And Arts Existing UPOD (THE PLEASE OF THE FLEORISE) PROPERTY & AUST BY IMPLEMENTED WIND ON E (1) ON E (1)	Inspected by: TYC	ADDING ACTORATION .	Inspection Record. Nod-Continued Sucross, FREPASSON IS ECCUL CAMINATION > 17	Were Property Lines Represented by Owner Was Property Surveyed	Previously Granted by Variance (b.O.A.)	□XX No	Permit Date: $1/16-12$	Reason for Denial:	Sanitary Number: 12 01(85 # of bedrooms:
And the state of t	Date of Approval 2012	-	N POTAL AND ENDOUGH WOOD	Date of Re-Inspection:	Lakes Classification( 光 )	Zoning District ( K-1 )	vner ⊠ Yes □ No	#	Affidavit Required Affidavit Attached Yes No	. 11.1		Sankary Date: